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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.18 (e)) required)

| | |
|------------------------|-------------------|
| Attorney Docket Number | 303-102(US) |
| First Named Inventor | Stewart A. Burton |
| COMPLETE IF KNOWN | |
| Application Number | / |
| Filing Date | |
| Group Art Unit | |
| Examiner Name | |

As a below named Inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Lifting Device And Method

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 11/04/2004 as United States Application Number or PCT International

Application Number PCT/2004/036728 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(e)(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DEC 1

Utility or Design Patent Application

| | | | |
|---|--|---|---------------------------|
| Detailed description of the invention | | | |
| Address where you reside or do business (if any) | | | |
| Telephone _____ Fax _____ | | | |
| <p>I declare that all statements made herein of my own knowledge are true and that all statements made on information and belief to be true are made in good faith; that such statements were made with the knowledge that would cause statements and the like so made by me to be subject to examination, or both, under 35 U.S.C. 1001 and that such willful false statements may jeopardize the patentability of my invention.</p> | | | |
| OF SOLE OR INVENTOR : | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Name _____ Stewart A. | | Family Name Burton or Surname | |
| Residence City Milford | | State CT | Country US Citizenship |
| Business Address (if any) _____ | | ZIP 06460 | US Country |
| Residence City _____ | | State _____ | Country _____ |
| Business Address (if any) _____ | | ZIP _____ | Country _____ |
| Residence City _____ | | State _____ | Country _____ |
| Business Address (if any) _____ | | ZIP _____ | Country _____ |
| <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Name _____ or Surname | | Date _____ | |
| Residence City _____ | | State _____ | Country _____ |
| Business Address (if any) _____ | | ZIP _____ | Country _____ |
| <input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto. | | | |

(Page 2 of 2)

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor

| | | | |
|---|---------------------------|---------|-------------|
| Given Name First and middle (if any) | Family Name or Surname | | |
| Inventor's Signature | Date | | |
| Residence: City | State | Country | Citizenship |

Mailing Address

| | | | |
|------|-------|-----|---------|
| City | State | ZIP | Country |
|------|-------|-----|---------|

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

| | | | |
|---|-----------|---------------------------|--------------|
| Given Name First and middle (if any) | Robert R. | Family Name or Surname | Hellman, Jr. |
| Inventor's Signature | 5-3-06 | | |
| Residence: City | State | Country | Citizenship |

Mailing Address

| | | | |
|------|-------|-----|---------|
| City | State | ZIP | Country |
|------|-------|-----|---------|

Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.